Fill in this information to ident		
		FILED
United States Bankruptcy Court	for the :	UNITED STATES BANKRUPTCY COURT
Northern District of Illinois	or the.	NORTHERN DISTRICT OF ILLINOIS
Northern District of Hillinois		JUL 25 2016
Case number (If known):	Chapter you are filing under	:
	Chapter 7 Chapter 11	JEFFREY P. ALLSTEADT, CLERK
	☐ Chapter 12	☐ Check if this is an
	☐ Chapter 13	amended filing
Official Form 101		
Voluntary Pet	ition for Individuals F	Filing for Bankruptcy 12/15
Debtor 2 to distinguish between same person must be Debtor 1 in Be as complete and accurate as information. If more space is nead if known). Answer every questions	ithem. In joint cases, one of the spouses must in all of the forms. possible. If two married people are filing togetheded, attach a separate sheet to this form. On the	ed about the spouses separately, the form uses <i>Debtor 1</i> and report information as <i>Debtor 1</i> and the other as <i>Debtor 2</i> . The her, both are equally responsible for supplying correct he top of any additional pages, write your name and case number
Part 18 Identify Yourself		
Varantillarana	About Debtor 1: A Control of the Applied Uses	About Debtor 2 (Spouse Only in a Joint Case):
. Your full name		
Write the name that is on your government-issued picture	Trenae	
Write the name that is on your government-issued picture identification (for example,	First name	First name
Write the name that is on your government-issued picture		First name Middle name
Write the name that is on your government-issued picture identification (for example, your driver's license or	First name Shafon Middle name Drane	
Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting	First name Shafon Middle name	
Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture	First name Shafon Middle name Drane	Middle name
Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	First name Shafon Middle name Drane Last name	Middle name Last name
Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	First name Shafon Middle name Drane Last name	Middle name Last name
Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	First name Shafon Middle name Drane Last name Suffix (Sr., Jr., II, III)	Middle name Last name Suffix (Sr., Jr., II, III)
Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or	First name Shafon Middle name Drane Last name Suffix (Sr., Jr., II, III)	Middle name Last name Suffix (Sr., Jr., II, III)
Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years	First name Shafon Middle name Drane Last name Suffix (Sr., Jr., II, III)	Middle name Last name Suffix (Sr., Jr., II, III)
Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or	First name Shafon Middle name Drane Last name Suffix (Sr., Jr., II, III) First name Middle name	Middle name Last name Suffix (Sr., Jr., II, III) First name Middle name
Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or	First name Shafon Middle name Drane Last name Suffix (Sr., Jr., II, III) First name Middle name Last name	Middle name Last name Suffix (Sr., Jr., II, III) First name Middle name Last name
Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or	First name Shafon Middle name Drane Last name Suffix (Sr., Jr., II, III) First name Middle name Last name	Last name Suffix (Sr., Jr., II, III) First name Middle name Last name First name
Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or	First name Shafon Middle name Drane Last name Suffix (Sr., Jr., II, III) First name Middle name Last name Middle name Middle name	Middle name Last name Suffix (Sr., Jr., II, III) First name Middle name Last name Middle name Middle name
Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or	First name Shafon Middle name Drane Last name Suffix (Sr., Jr., II, III) First name Middle name Last name Middle name Middle name	Middle name Last name Suffix (Sr., Jr., II, III) First name Middle name Last name Middle name Middle name
Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names.	First name Drane Last name Suffix (Sr., Jr., II, III) First name Middle name Last name Last name Last name Middle name Last name	Middle name Suffix (Sr., Jr., II, III) First name Middle name Last name Last name Last name Last name
Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or	First name Shafon Middle name Drane Last name Suffix (Sr., Jr., II, III) First name Middle name Last name Middle name Middle name	Middle name Suffix (Sr., Jr., II, III) First name Middle name Last name Last name Middle name XXX - XX -
Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names.	First name Shafon Middle name Drane Last name Suffix (Sr., Jr., II, III) First name Middle name Last name Last name XXX - XX - 1 9 5 9	Middle name Suffix (Sr., Jr., II, III) First name Middle name Last name Last name Last name Last name

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D	Pebtor 1 Trenae Shafon	Drane		Case number (if known)
	First Name Middle	Name Last Name	·····	Case number (Fknown)
Signiy	e like Grand and Sand Sand Sand Sand Sand Sand Sa	About Debtor 1:	nt filosofia de la tracas de polos filosoficias de la filosoficia	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in	I have not used any b	usiness names or EINs.	☐ I have not used any business names or EINs.
	the last 8 years Include trade names and	Business name		Business name
	doing business as names	Business name		Business name
		EIN	AMARIA MANANA HITTORIA AMARIAN	EIN
		EIN		EIN
5.	Where you live			if Debtor 2 lives at a different address:
		4016 W. 93rd Street		
		Number Street		Number Street
		Oak Lawn	IL 60453	
		Cook	State ZIP Code	City State ZIP Code
		County		County
		If your mailing address i above, fill it in here. Note any notices to you at this r	that the court will send	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street		Number Street
		P.O. Box		P.O. Box
		City	State ZIP Code	City State ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days I have lived in this district. I have another reason. (See 28 U.S.C. § 1408	Explain.	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

				· .

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Debtor 1

Trenae Shafon Drane

Name Middle Name Last N				
	Vame	Middle Na	me	Last N

Case number (if known)_

P	art 2: Tell the Court Abo	ut Your E	Bankrup	otcy Case				
7.	The chapter of the Bankruptcy Code you	Check of for Bank	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	are choosing to file under	🔏 Cha	pter 7					
		☐ Cha	pter 11					
		☐ Cha	pter 12					
		☐ Cha	pter 13					
8.	How you will pay the fee	loca your subn with I nec App I rec By li less pay	I court for self, you mitting you a pre-ped to palication for the self. I would be self to be self	or more details about to may pay with cash, or our payment on your to rinted address. The second of the second of the second of the second of the official pove to may but is not received.	now you reashier's coehalf, you may guired to, orty line the choose the	may pay. Typical check, or money ur attorney may bu choose this of Fee in Installment request this optimate your fee, at applies to you in soption, you m	eck with the clerk's office in your ly, if you are paying the fee order. If your attorney is pay with a credit card or check official, sign and attach the ents (Official Form 103A). Ition only if you are filing for Chapter 7, and may do so only if your income is ar family size and you are unable to nust fill out the Application to Have the with your petition.	
9.	Have you filed for bankruptcy within the	Z No						
	last 8 years?	Yes.	District		When	MM / DD / YYYY	Case number	
			District		When		Case number	
						MM / DD / YYYY		
			District		When	MM / DD / YYYY	Case number	
10.	Are any bankruptcy cases pending or being	No D Yes	Debtor				Relationship to you	
	filed by a spouse who is not filing this case with				When		Case number, if known	
	you, or by a business partner, or by an affiliate?		District		VVI (CS)	MM / DD / YYYY	Case Humber, it knows	
			Debtor	~~~			Relationship to you	
			District		When	MM / DD / YYYY	Case number, if known	
11.	Do you rent your residence?	No. Yes.	residen No. Yes	ur landlord obtained an ev ce? Go to line 12.			and do you want to stay in your t Against You (Form 101A) and file it with	

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Debtor 1	Trenae Shafon	****		Case number (if known)	
	First Name Middle Na	ne Last N	ame	- Control of the Cont	
Part 3:	Report About Any	Businesses Ye	ou Own as a Sole Pro	pprietor	
of a	you a sole proprietor ny full- or part-time iness?	No. Go to I	Part 4.		and district control of the second
A sol busir indivi sepa	le proprietorship is a ness you operate as an idual, and is not a trate legal entity such as rporation, partnership, or		of business, if any		
sole į sepai	I have more than one proprietorship, use a rate sheet and attach it s petition.	City		State ZIP Code	
			the appropriate box to death Care Business (as d		•
				s defined in 11 U.S.C. § 101(51B))	
		☐ st	ockbroker (as defined in	11 U.S.C. § 101(53A))	
		☐ co	mmodity Broker (as defir	ned in 11 U.S.C. § 101(6))	
		□ No	ne of the above		
Char Bank are y	you filing under pter 11 of the kruptcy Code and you a small business	most recent ba	riate deadlines. If you ind lance sheet, statement of	ourt must know whether you are a small busi- icate that you are a small business debtor, y operations, cash-flow statement, and federa low the procedure in 11 U.S.C. § 1116(1)(B).	ou must attach your
debte For a	or? definition of small	No. I am n	ot filing under Chapter 11		
busine	ess debtor, see S.C. § 101(51D).	No. I am fil the Ba	ing under Chapter 11, bu nkruptcy Code.	t I am NOT a small business debtor accordin	ng to the definition in
		Yes. I am fil Bankru	ing under Chapter 11 and ptcy Code.	d I am a small business debtor according to t	he definition in the
art 4:	Report if You Own o	or Have Any H	azardous Property o	r Any Property That Needs Immedia	te Attention
prope allege of im	ou own or have any erty that poses or is ed to pose a threat minent and difiable hazard to	No Yes. What	is the hazard?		
Or do prope imme	c health or safety? you own any erty that needs ediate attention? kample, do you own	lf imn	nediate attention is neede	d, why is it needed?	
	nable goods, or livestock				

that must be fed, or a building that needs urgent repairs?

	~~~		 		
If immediate attention is	s needed, w	hy is it needed?	 		
Where is the property?	Number	Street			
	City		State	ZiP Code	

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Debtor 1

Trenae Shafon Drane

irst Name Middle Name

Last Nac

Case number (if known)_____

Part 5:

## Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required	to receive a	a briefing	about
credit counseling			

I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

## About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing a	about
credit counseling because of:	

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-23725 Doc 1 Filed 07/25/16 Entered 07/25/16 11:44:18 Desc Main Page 6 of 50 Document

Debtor	4

Trenae	Shafon	Dran
11CHAG	Jugion	Ulali

Case number (if known)

	What kind of debts do you have?	16a. Are your debts primar as "incurred by an individua	ily consumer debts? Consumer del al primarily for a personal, family, or hou	bts are defined in 11 U.S.C. § 101(8) usehold purpose."		
	, •••	No. Go to line 16b. Yes. Go to line 17.				
		16b. Are your debts primari money for a business or in	ily business debts? Business debts restment or through the operation of the	are debts that you incurred to obtain business or investment.		
		No. Go to line 16c. Yes. Go to line 17.				
		16c. State the type of debts you	owe that are not consumer debts or bu	siness debts.		
	Are you filing under Chapter 7?	☐ No. I am not filing under Ch	apter 7. Go to line 18.	ભાગામાં ભાગમાં આવેલા સામાના માત્ર કરે છે. જે જે જે માત્ર કરવા માત્ર કરવા માત્ર કરવા માત્ર કરવા માત્ર કરવા માત્ર ભાગામાં માત્ર કરવા માત્ર		
	Do you estimate that after any exempt property is	Yes. I am filing under Chapte	er 7. Do you estimate that after any exer	mpt property is excluded and		
•	excluded and	administrative expenses are paid that funds will be available to distribute to unsecured creditors?				
ě	administrative expenses are paid that funds will be available for distribution o unsecured creditors?	☐ Yes				
3. <b>j</b>	low many creditors do you estimate that you	2 1-49	1,000-5,000	25,001-50,000		
	owe?	□ 50-99 □ 100-199 □ 200-999	5,001-10,000 10,001-25,000	50,001-100,000  More than 100,000		
	low much do you estimate your assets to	\$0-\$50,000 \$50,001-\$100,000	□ \$1,000,001-\$10 million	☐ \$500,000,001-\$1 billion		
	pe worth?	\$100,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	□ \$1,000,000,001-\$10 billion □ \$10,000,000,001-\$50 billion □ More than \$50 billion		
	low much do you estimate your liabilities	<b>2</b> \$0-\$50,000	☐ \$1,000,001-\$10 million	\$500,000,001-\$1 billion		
	o be?	\$50,001-\$100,000 \$100,001-\$500,000	\$10,000,001-\$50 million \$50,000,001-\$100 million	\$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion		
i I	変名 Sign Below	\$500,001-\$1 million	□ \$100,000,001-\$500 million	☐ More than \$50 billion		
٥r	you	I have examined this petition, and correct.	d I declare under penalty of perjury that	the information provided is true and		
		If I have chosen to file under Cha of title 11, United States Code. It under Chapter 7.	pter 7, I am aware that I may proceed, understand the relief available under ea	if eligible, under Chapter 7, 11,12, or 13 ch chapter, and I choose to proceed		
		If no attorney represents me and this document, I have obtained at	I did not pay or agree to pay someone nd read the notice required by 11 U.S.C	who is not an attorney to help me fill out . § 342(b).		
		I request relief in accordance with	n the chapter of title 11, United States C	ode, specified in this petition.		
		I understand making a false state with a bankruptcy case can result 18 U.S.C. §§ 152, 1341, 1519, ar	t in fines up to \$250,000, or imprisonme	money or property by fraud in connection to up to 20 years, or both.		
		* Thenae Gra	ne x			
		Signature of Debtor 1	•	e of Debtor 2		
		Executed on 07/15/2016 MM / DD / Y	Executed	on		

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Debtor 1

Trenae Shafon Drane

	maion biai
*****	
First Name	Adirecto Atomor

Last Na

Case number (# known)

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

	or iditinal i	any didic exemption laws that apply.				
	Are you awa	are that filing for bankruptcy is a serious acti ces?	on with long-te	erm financial and legal		
	☐ No					
	🗹 Yes					
	Are you awa inaccurate o	are that bankruptcy fraud is a serious crime and incomplete, you could be fined or imprisor	and that if you ned?	r bankruptcy forms are		
	☐ No					
	☑ Yes					
1.	Did you pay ∑ No	or agree to pay someone who is not an atto	rney to help y	ou fill out your bankruptcy forms?		
`		ne of Person		•		
Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).						
	By signing h	ere, I acknowledge that I understand the ris	ks involved in	filing without an attorney. I		
	have read a	nd understood this notice, and I am aware th	nat filing a ban	kruptcy case without an		
	attorney may cause me to lose my rights or property if I do not properly handle the case.					
×	· She	nae Irane x				
	Signature of E	Debtor 1	Signature of De	btor 2		
	Date	07/15/2016	Date			
		MM / DD / YYYY		MM / DD / YYYY		
	Contact phone	(708) 737-0309	Contact phone			
	Cell phone	(708) 737-0309	Cell phone			
	Email address	trenaedrane@gmail.com	Email address			

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Fill in this	information to identify yo	our case:			
Debtor 1	Trenae Shafon Drane				
Debtor 2	First Name	Middle Name	Last Name		
	ng) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the: No	orthern District o	f Illinois		-
Case numb	er (if known)		All refused to the second seco		Check if this is a amended filing
Be as compinformation your origina	olete and accurate as poss	ible. If two mar ules first; then a new <i>Summar</i>	τied people are filing complete the inform	nd Certain Statistical Information on this form. If you are filing amend at the top of this page.	or supplying correct
					Your assets
					Value of what you own
	AB: Property (Official Form	-	<b>5</b>		s 0.00
та. Сору	line 55, Total real estate, fro	om Scheaule A/I	B		\$
1ь. Сору	line 62, Total personal prop	erty, from Sched	dule A/B		\$13,500.00
1с. Сору	line 63, Total of all property	on Schedule A/	В		\$ 13,500.00
Part 2:	Summarize Your Liabíli	ties			
					Your liabilities Amount you owe
	D: Creditors Who Have Cla				_{\$} 17,950.00
				f the last page of Part 1 of Schedule D	#,000.00
	E/F: Creditors Who Have U				\$ 0.00

ſ	Part 3	Summarize	Your	Income	and	Expenses

4.	Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I	\$	194.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	e	479.00

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....

73,054.00

91,004.00

Your total liabilities

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Document Trenae Shafon Drane

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Uŧ	Pirst N		Middle Name	Last Name	Case number (if known)	
P	art 4: Answ	er The	se Question	s for Administrative	and Statistical Records	
6.	Are you filing	for bani	ruptcy under	r Chapters 7, 11, or 13?		
	No. You ha	ive nothi	ng to report on	this part of the form. Che	eck this box and submit this form to the court with your o	other schedules.
7.	What kind of c	lebt do y	ou have?	****		to come the first of the second of the secon
	Your debte family, or h	s are pri	marily consur purpose." 11	mer debts. Consumer de U.S.C. § 101(8). Fill out l	obts are those "incurred by an individual primarily for a pelines 8-9g for statistical purposes. 28 U.S.C. § 159.	ersonal,
	Your debte this form to	are not the cour	primarily cor t with your oth	nsumer debts. You have er schedules.	nothing to report on this part of the form. Check this box	x and submit
8.	From the State Form 122A-1 L	ement of ine 11; C	Your Current R, Form 122B	t Monthly Income: Copy 3 Line 11; OR, Form 1220	your total current monthly income from Official C-1 Line 14.	\$ 194.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	s0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$54,935.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$54,935.00

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Debtor 1	Trenae Shafe	on Drane		
Deplot 1	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court fo	r the: Northern District of I	llinois	

Check if this is an amended filing

## Official Form 106A/B

# Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

. Do you own or have any legal or equitable	e interest in any residence, building, land, or similar pro	norty?	
No. Go to Part 2.	pro	perty r	
Yes. Where is the property?			
1.1. Street address, if available, or other descri	Condominium or cooperative  Manufactured or mobile home  Land	the amount of any secure Creditors Who Have Clas	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own? \$ 0.00
City State Zi	P Code Other Who has an interest in the property? Check one	Describe the nature interest (such as fee the entireties, or a life	simple, tenancy by
County	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another  Other information you wish to add about this i	Check if this is co	ommunity property
If you own or have more than one list have	property identification number:		
If you own or have more than one, list here:  1.2. Street address, if available, or other descrip	<ul> <li>Condominium or cooperative</li> </ul>	Do not deduct secured cla the amount of any secure Creditors Who Have Clain Current value of the	d claims on Schedule D: ns Secured by Property.
	Manufactured or mobile home	entire property?	portion you own?
	Land	\$	\$ 0.00
City State ZIP	Investment property Code Code Other	Describe the nature of interest (such as fees the entireties, or a life	simple, tenancy by
	Who has an interest in the property? Check one.		
County	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number: 0	Check if this is con (see instructions)	mmunity property

Debto	1 renae Shato	3725 DOC 1 n Drane Last Name	Filed 07/25/16 Entered 07/25/16 Document Page 11 of 50 number (		
1.	3. Street address, if availat	ole, or other description State ZIP Code	What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land Investment property  Timeshare  Other	the amount of any secure Creditors Who Have Cle Current value of the entire property?  \$ Describe the nature interest (such as fee	portion you own?  \$ of your ownership simple, tenancy by
	County		Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Other information you wish to add about this it	Check if this is constructions)	,,
2. Add you	the dollar value of the have attached for Part	portion you own for a 1. Write that number i	Il of your entries from Part 1, including any entrie	es for pages	\$ 0.00
you owr	own, lease, or have leg n that someone else drive s, vans, trucks, tractors	gal or equitable interes as. If you lease a vehicle	st in any vehicles, whether they are registered or e, also report it on Schedule G: Executory Contracts , motorcycles	<b>not?</b> Include any vehicle: and Unexpired Leases.	S
3.1.	Make: Model: Year: Approximate mileage:	Altima 2014 70,000	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured dathe amount of any secured Creditors Who Have Clain  Current value of the entire property?	d claims on Schedule D:
	Other information:		☐ Check if this is community property (see instructions)	\$11,500.00	\$11,500.00
If you	own or have more than	one, describe here:			
3.2.	Make: Model: Year:		Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured claimed the amount of any secured Creditors Who Have Claimed Current value of the antire property?	claims on Schedule D:

Official Form 106A/B

Approximate mileage:

Other information:

instructions)

At least one of the debtors and another

 $oldsymbol{\square}$  Check if this is community property (see

portion you own?

entire property?

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odel: par: proximate mileage: her information:  uke: proximate mileage: proximate mileage: proximate mileage: her information:	Check if this is community property (see instructions)  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the entire property?  \$  Do not deduct secured content amount of any security.	\$
proximate mileage: her information:  like: heldel: ar: proximate mileage: her information:	Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see	Current value of the entire property?  \$	c Current value of the portion you own?  \$
her information:  uke:  udel: ar:  proximate mileage: ner information:	At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see	Do not deduct secured c the amount of any secure Creditors Who Have Clas	portion you own?  \$
her information:  uke:  udel:  ar:  proximate mileage:  ner information:	Check if this is community property (see instructions)  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another  Check if this is community property (see	Do not deduct secured c the amount of any secure Creditors Who Have Clas Current value of the	staims or exemptions. Put ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own?
ike:  del:  ar:  proximate mileage:  ner information:	instructions)  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see	the amount of any securic Creditors Who Have Clair Current value of the	daims or exemptions. Put ed claims on Schedule D: Ims Secured by Property. Current value of the portion you own?
ike:  del:  ar:  proximate mileage:  ner information:	instructions)  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see	the amount of any securic Creditors Who Have Clair Current value of the	daims or exemptions. Put ed claims on Schedule D: Ims Secured by Property. Current value of the portion you own?
ike:  del:  ar:  proximate mileage:  ner information:	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	the amount of any securic Creditors Who Have Clair Current value of the	ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own?
ar: proximate mileage: per information:	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see	the amount of any secure Creditors Who Have Clas Current value of the	ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own?
ar: proximate mileage: per information:	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see	Current value of the	Current value of the portion you own?
proximate mileage: ner information:	Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this is community property (see		portion you own?
ner information:	☐ At least one of the debtors and another ☐ Check if this is community property (see	entire property?	
		\$	\$
		\$	\$
del: del: nr: er information:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see	the amount of any secure	d claims on Schedule D:
	instructions)	\$	\$
or have more than one, list here			
e:			
lel:	<del>-</del>		
r:	Debtor 2 only		із зесигей бу Ргорепу.
****	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	At least one of the debtors and another	entire property?	portion you own?
er information:	At least one of the deplots and another		
	del: r: er information:  or have more than one, list here e: el:	Who has an interest in the property? Check one.  del: Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Or have more than one, list here:  E: Debtor 1 only Debtor 1 only Debtor 2 only	Debtor 1 only The amount of any secure Creditors Who Have Clair The information:  Debtor 2 only Debtor 1 and Debtor 2 only Current value of the entire property?  Check if this is community property (see instructions)  Check if this is community property (see Do not deduct secured clair The amount of any secure Creditors Who Have Clair  Debtor 1 only Debtor 2 only

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## Part 3: **Describe Your Personal and Household Items**

Do	you own or have any legal or equitable interest in any of the following items?	portion y	uct secured claims
6.	Household goods and furnishings		
	Examples: Major appliances, furniture, linens, china, kitchenware		
	□ No		
	☑ Yes. Describe miscellaneous common household goods	\$	500.00
7.	Electronics		
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games  No		
	Yes. Describe miscellaneous common electronics	\$	500.00
8.	Collectibles of value	e english	
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles  No		
	Yes. Describe	\$	
9.	Equipment for sports and hobbies	· ····	
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments		
	No No		
	Yes. Describe	\$	
	Firearms		
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment  ☑ No		
	☑ No ☐ Yes. Describe	,ma,	
		\$	
1. 0	Clothes		
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories  No		
	Yes. Describe necessary common wearing apparel	\$	1,000.00
2. J	leweiry		
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver		
	☑ No ☐ Yes. Describe	\$	
3 N	Ion-farm animals		
	Examples: Dogs, cats, birds, horses		
	73		
	Yes. Describe	\$	
4. <b>A</b>	my other personal and household items you did not already list, including any health aids you did not list	}	
	2 No		
-	Yes. Give specific	}	
•	information	\$	
5 A			
بر. fi	add the dollar value of all of your entries from Part 3, including any entries for pages you have attached or Part 3. Write that number here	\$	2,000.00
-	Fait 5. Write that number nere		

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	First Name	Middle Name	Last Name	rage 14	O Dasenumber (it knowl	7}	
Part 4: D	escribe Yo	ur Financial A	<b>l</b> ssets				

Do you own or have an	y legal or equitable interest in	any of the following?		Current valu portion you of Do not deduct so or exemptions.	own?
16. <b>Cash</b> <i>Examples:</i> Money yo	u have in your wallet, in your ho	me, in a safe deposit box, and on hand wh	en you file your petition		
☑ No □ Yes					
			Cash:	\$	0.00
and other	savings, or other financial accorsimilar institutions. If you have n	unts; certificates of deposit; shares in cred nultiple accounts with the same institution,	iit unions, brokerage houses, list each.		
O Yes		Institution name:			
		institution rame.			
	17.1. Checking account:			\$	_
	17.2. Checking account:			\$	
	17.3. Savings account:			\$	
	17.4. Savings account:		***************************************	\$	
	17.5. Certificates of deposit:			\$	
	17.6. Other financial account:			_	
	17.7. Other financial account:			\$	
	17.8. Other financial account:				
	17.9. Other financial account:			\$	
				<b>p</b>	
8. Bonds, mutual funds	, or publicly traded stocks				
Examples: Bond funds		erage firms, money market accounts			
☑ No ☐ Yes	Institution or issuer name:				
165	institution or issuer name;				
				\$	
				\$	
				\$	
9. Non-publicly traded s an LLC, partnership,	tock and interests in incorpor and joint venture	ated and unincorporated businesses, in	ncluding an interest in		
☑ No	Name of entity:		% of ownership:		
Yes. Give specific	•		0% %	<b>¢</b>	
information about them			0% %	\$	

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☑ No			
Yes. Give specific	Issuer name:		
information about them			\$
	445-44-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-		\$
			\$
Retirement or pension			
Examples: Interests in I	RA, ERISA, Keogh, 4	101(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
Yes. List each account separately.	Type of account:	Institution name:	
	401(k) or similar plan:		\$
	Pension plan:		\$
	IRA:		
	Retirement account:		\$
	Keogh:		\$
	Additional account:		\$
			\$
Your share of all unused Examples: Agreements v	l deposits you have m	nade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications	\$
Your share of all unused Examples: Agreements of companies, or others	prepayments I deposits you have m with landlords, prepai	nade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications	\$
Your share of all unused Examples: Agreements to companies, or others	prepayments I deposits you have m with landlords, prepaid Ins	nade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$
Your share of all unused Examples: Agreements of companies, or others  No	prepayments I deposits you have m with landlords, prepai	nade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications	\$\$
Your share of all unused Examples: Agreements of companies, or others  No	prepayments I deposits you have m with landlords, prepair Ins Electric:	nade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$ \$\$
Your share of all unused Examples: Agreements of companies, or others  No	prepayments I deposits you have m with landlords, prepair Ins Electric: Gas: Heating oil:	nade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$
Your share of all unused Examples: Agreements of companies, or others  No	prepayments I deposits you have m with landlords, prepair Ins Electric: Gas: Heating oil:	nade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$
Your share of all unused Examples: Agreements of companies, or others  No	prepayments I deposits you have m with landlords, prepair Ins Electric: Gas: Heating oil: Security deposit on ren	nade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$ \$\$ \$\$
Your share of all unused Examples: Agreements of companies, or others  No	prepayments I deposits you have me with landlords, prepaid lins Electric: Gas: Heating oil: Security deposit on rene	nade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$ \$\$ \$\$
Your share of all unused Examples: Agreements of companies, or others  No	prepayments I deposits you have mouth landlords, prepaid Ins Electric: Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone:	nade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$ \$\$ \$\$ \$\$
Your share of all unused Examples: Agreements of companies, or others  No	prepayments I deposits you have me with landlords, prepaid lines Electric: Gas: Heating oil: Security deposit on rene prepaid rent: Telephone: Water:	nade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$ \$\$ \$\$ \$\$
Your share of all unused Examples: Agreements of companies, or others  No	prepayments I deposits you have mouth landlords, prepaid Ins Electric: Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: Water: Rented furniture:	nade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$ \$\$ \$\$ \$\$
Your share of all unused Examples: Agreements of companies, or others  No Yes	prepayments I deposits you have mouth landlords, prepaid Institute of the second of th	nade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$ \$\$ \$\$ \$\$
Your share of all unused Examples: Agreements of companies, or others  No Yes	prepayments I deposits you have mouth landlords, prepaid Institute of the second of th	nade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$ \$\$ \$\$ \$\$
Your share of all unused Examples: Agreements of companies, or others  No Yes	prepayments I deposits you have mouth landlords, prepaid Institute of the second of th	nade so that you may continue service or use from a company dirent, public utilities (electric, gas, water), telecommunications stitution name or individual:  Ital unit:  Ital unit:  If money to you, either for life or for a number of years)	\$\$ \$\$ \$\$ \$\$
Examples: Agreements of companies, or others  No Yes  Annuities (A contract for No	prepayments I deposits you have mouth landlords, prepaid instance in the second in the	nade so that you may continue service or use from a company dirent, public utilities (electric, gas, water), telecommunications stitution name or individual:  Ital unit:  Ital unit:  If money to you, either for life or for a number of years)	\$\$ \$\$ \$\$ \$\$ \$\$ \$\$
Your share of all unused Examples: Agreements of companies, or others  No Yes	prepayments I deposits you have mouth landlords, prepaid instance in the second in the	nade so that you may continue service or use from a company of rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$ \$\$ \$\$ \$\$

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Document Page 16 of 50 number (if known) 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ☑ No 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit **Ø** No ☐ Yes. Give specific information about them .... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them.... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses **Ø** No Yes. Give specific information about them.... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ☐ Yes. Give specific information Federal: about them, including whether you already filed the returns State: and the tax years. ..... Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement Yes. Give specific information..... Alimony: Maintenance: Support: Divorce settlement: Property settlement: 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else M No Yes. Give specific information.....

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04 4-44-5-5-			
31. Interests in insurance policies  Examples: Health, disability, or life insurance	re: health savings account (USA	.); credit, homeowner's, or renter's insurance	
No	ce, nealth savings account (HSA	); credit, nomeowner's, or renter's insurance	
Yes. Name the insurance company			
of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
			\$
			\$
			\$
32. Any interest in property that is due you t			
If you are the beneficiary of a living trust, exproperty because someone has died.	rpect proceeds from a life insural	nce policy, or are currently entitled to receive	
☑ No			
Yes. Give specific information			A Section 6
:			\$
33. Claims against third parties, whether or r			••••••
Examples: Accidents, employment disputes	, insurance claims, or rights to si	ue	
☑ No	-		
Yes. Describe each claim			****
•			<u> </u>
34. Other contingent and unliquidated claims to set off claims			
No No			
Yes. Describe each claim			
			\$
35. Any financial assets you did not already I	ist		
☑ No	and the state of t		
☐ Yes. Give specific information			
:			\$
36 Add the dollar value of all of your ontrine	Season Physic & Surellands		
36. Add the dollar value of all of your entries for Part 4. Write that number here	mom Part 4, including any ent	ries for pages you have attached	0.00
		7	
Part 5: Describe Any Business-Re	elated Property You Ow	n or Have an Interest In. List any i	eal estate in Part 1.
37. Do you own or have any legal or equitable	interest in any husiness relat	ad property 2	
No. Go to Part 6.	morest in any pusitess-relat	ed property?	
Yes. Go to line 38.			
_ 1 331 03 10 111/0 001			
			Current value of the
			portion you own?  Do not deduct secured claims
			or exemptions.
38. Accounts receivable or commissions you	already earned		
☑ No			
Yes. Describe			
			\$
39. Office equipment, furnishings, and supplie	es		•
	nodems, printers, copiers, fax machin	es, rugs, telephones, desks, chairs, electronic devices	
2 No			
Yes. Describe			\$
			Y

Debtor 1 Case S First Name	L6-23725 Do hafon Drane Middle Name			Entered 07/25/1 Page 18 of:55€numl		
Machinery, fixtures,	equipment, supplie	s you use in busir	ess, and tool	s of your trade		
<b>☑</b> No						
Yes. Describe	;					\$
	·					
nventory						
☑ No ☑ Yes. Describe		19.44 - Ann an ann an ann an ann an ann an ann an a		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
wa 165. Describe						\$
nterests in partnersh  No  Yes. Describe	Name of entity:				% of ownership:	
						\$
						\$
					%	2
ustomer lists, mailir No Yes. Do your lists No Yes. Desc	include personally	identifiable inform		ined in 11 U.S.C. § 101(		<b>\$</b>
ny business-related No	property you did n	ot already list				
Yes. Give specific information					***	\$
						\$
						\$
						\$
					<del></del>	Φ.

Part 6:

Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No. Go to Part 7.  Yes. Go to line 47.	
	Gu po

for Part 5. Write that number here

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached

Current value of the portion you own?

Do not deduct secured claims or exemptions.

0.00

47.	Farm animals	or exemptions.
	Examples: Livestock, poultry, farm-raised fish	
	☑ No	
	☐ Yes	1

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48. Crops—either growing or harvested	
☑ No	
Yes. Give specific information	
49. Farm and fishing equipment, implements, macl	hinery, fixtures, and tools of trade
☑ No	
50. Farm and fishing supplies, chemicals, and feed	\$
☑ No	
☐ Yes	
	\$
51. Any farm- and commercial fishing-related property.  No	erfy you did not aiready list
information	<b>\$</b>
for Part 6. Write that number here	Part 6, including any entries for pages you have attached
53. Do you have other property of any kind you did  Examples: Season tickets, country club membership  No  Yes. Give specific information	\$ \$
	art 7. Write that number here \$\ \square 0.00\$
55. Part 1: Total real estate, line 2	<b>→ \$</b> 0.00
56. Part 2: Total vehicles, line 5	\$ 11,500.00
57. Part 3: Total personal and household items, line	T
58. Part 4: Total financial assets, line 36	\$0.00
59. Part 5: Total business-related property, line 45	\$
60.Part 6: Total farm- and fishing-related property, li	ine 52 \$
61. Part 7: Total other property not listed, line 54	+\$0.00
62. Total personal property. Add lines 56 through 61	\$ 13,500.00 Copy personal property total → + \$ 13,500.00
33. <b>Total of all property on Schedule A/B.</b> Add line 55	+ line 62\$ 13,500.00

Case 16-23725 Doc 1 Filed 07/25/16 Entered 07/25/16 11:44:18 Desc Main Page 20 of 50 Document Fill in this information to identify your case: Trenae Shafon Drane Debtor 1 Debtor 2 (Spouse, if filling) First Name Middle Name United States Bankruptcy Court for the: Northern District of Illinois Check if this is an (If known) amended filing Official Form 106C Schedule C: The Property You Claim as Exempt 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known), For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount. Part 1: Identify the Property You Claim as Exempt 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Brief 735 ILCS 5/12-1001(c) Nissan Altima 11,500.00 **∠** \$ 2,400.00 description: 100% of fair market value, up to Line from 3.1 any applicable statutory limit Schedule A/B: Brief household goods 500.00 735 ILCS 5/12-1001(a) **3** \$ 500.00 description: 100% of fair market value, up to Line from Schedule A/B: any applicable statutory limit Brief electronics 500.00 □ \$ 500.00 description: 735 ILCS 5/12-1001(b) 100% of fair market value, up to Line from Schedule A/B: 7 any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) M No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? Nο

Yes

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Debtor 1	Trenae Shafon	Drane		
•	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court fo	or the: Northern District of I	Ninois	
_				
Case number (If known)			the control of the co	☐ Check if this is a

12/15

in	formation. If more space is needed, cop dditional pages, write your name and ca	y the Additional Page, fill it out, number the entries, se number (if known).	and a	responsible to	or su form	pplying correct . On the top of	any
800	Yes. Fill in all of the information below	m to the court with your other schedules. You have noth	ing els	e to report on t	his fo	rm.	
20000	for each claim. If more than one creditor h	nore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. nabetical order according to the creditor's name.	Do no	nn A unt of claim it deduct the of collateral.		e of collateral supports this	Column C Unsecured portion If any
2.1	Nissan Motors	Describe the property that secures the claim:	\$	17,950.00	S.	11,500.00 s	
	Creditor's Name PO Box 660366  Number Street	2014 Nissan Altima	~		V.,,,,,,,,,,	<u> </u>	
	Dailas TX 75266  City State ZIP Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim relates to a community debt Date debt was incurred  Creditor's Name	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)  Last 4 digits of account number  Describe the property that secures the claim:	100 100 100 100 100 100 100 100 100 100		formulation of transportation	**COMMONT BUTTLAND, Annual Social Programme *** A A A ANNUAL PROGRAMME **** A ANNUAL PROGRAMME *** A ANNUAL	Moderation and the stable disease response consenses.
	Number Street						
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed					
	The owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit  Other (including a right to offset)					

Check if this claim relates to a

community debt Date debt was incurred

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

17,950.00

	Fill in this ii	Case 16-23725 Information to identify yo	Doc 1	Filed 07/25/16 Document	Entered 07/25/16 11	:44:18	Desc Main	
	Debtor 1	Trenae Shafon Drane						
	Debtor 2	First Name	Middle Name	Last Name				
	(Spouse, if filing	) First Name	Middle Name	Last Name	AAAAA			
	United States	Bankruptcy Court for the: No	orthern Distric	ct of Illinois				
	Case number (If known)						Check if amende	
<u>C</u>	Official F	Form 106E/F						
S	ched	ule E/F: Cred	litors \	<i>N</i> ho Have U	nsecured Clain	ns		12/15
A/ cn ne an	st the other B: Property editors with eded, copy y additiona	party to any executory ( (Official Form 106A/B) a partially secured claims	contracts or and on Sche s that are lis out, number a and case n	unexpired leases that of dule G: Executory Cont ted in Schedule D: Crea r the entries in the boxe umber (if known).	RIORITY claims and Part 2 for could result in a claim. Also li- tracts and Unexpired Leases ( litors Who Have Claims Secur s on the left. Attach the Conti	st executory Official Form	y contracts on <i>Sche</i> n 106G). Do not incl erty, if more space is	<i>dule</i> lude any
1.	Do any cre	editors have priority uns	ecured clain	ns against you?				
	No. Go	to Part 2.						
2.	List all of each claim nonpriority unsecured	amounts. As much as pos claims, fill out the Continu	of claim it is. I ssible, list the ation Page o	f a claim has both priority claims in alphabetical or f Part 1. If more than one	e priority unsecured claim, list the and nonpriority amounts, list the der according to the creditor's naceditor holds a particular claim in the instruction booklet.)	at claim here	and show both priori lave more than two pi or creditors in Part 3.	ity and
2.1				l oot 4 digita of access		\$	\$ \$	
	Priority Cred	itor's Name		Last 4 digits of accou		Φ	\$\$\$	
	Number	Street		When was the debt in	curred?			
			····	As of the date you file	, the claim is: Check all that apply			
	City	State	ZIP Code	Contingent				
	Who incu	rred the debt? Check one.		Unliquidated				
	Debtor	1 only		Disputed				
	Debtor	2 only 1 and Debtor 2 only		Type of PRIORITY ur	nsecured claim:			
		t and Deotor 2 only tone of the debtors and anoth	er	Domestic support ob				
		if this claim is for a comm			her debts you owe the government			
		m subject to offset?		Claims for death or p intoxicated	ersonal injury while you were			
	☐ No			Other. Specify				
	Yes	ttalistesseniisel leigigii leitaniselisseniiselpen enemas prome enthematiselphesia promete persena.	n Selvent of the Selvent Selve					
2	<u> </u>				nt number			
	Priority Credit	tor's Name		When was the debt inc	curred?	<b>P</b>	\$ \$	**************************************
	Number	Street						
	***************************************			Contingent	, the claim is: Check all that apply.			
	City	State	ZIP Code	Unliquidated			Y	
	Who incur	red the debt? Check one.		☐ Disputed				
	Debtor 1			Type of PRIORITY un	secured claim:			
	Debtor 2			Domestic support obli				
		I and Debtor 2 only one of the debtors and another	or.		er debts you owe the government			
		if this claim is for a comm		Claims for death or pe	ersonal injury while you were			
		n subject to offset?	ainty debt	intoxicated	-			
	☐ No	Janjeot to onset (		Outer, Specify				
	Yes							

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Part 2:

List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

	No. You have nothing to report in the Yes									
4.	nonphonty unsecured claim, list the cr	editor sepa editor holds	rately for each c	cal order of the creditor who holds each claim. If a creditor hat alaim. For each claim listed, identify what type of claim it is. Do not im, list the other creditors in Part 3.If you have more than three not be other creditors.	t liet de	sime alzoady				
4.1	SYNCB/Care Credit				Tot	al claim				
L	Nonpriority Creditor's Name			Last 4 digits of account number	s 1,432.00					
	POB 965036			When was the debt incurred? 07/04/2012	<b>\$</b>	1,402.00				
	Number Street									
	Orlando	FL	32896							
	City	State	ZIP Code	As of the date you file, the claim is: Check all that apply.						
				☐ Contingent						
	Who incurred the debt? Check one.			☐ Unliquidated						
	Debtor 1 only			☑ Disputed						
	Debtor 2 only									
	Debtor 1 and Debtor 2 only  At least one of the debtors and anothe			Type of NONPRIORITY unsecured claim:						
				Student loans						
	Check if this claim is for a community the claim subject to offset?	inity debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	No			Debts to pension or profit-sharing plans, and other similar debts	}					
	Yes			Other. Specify utilities						
-	И в том которы тургарай этом объектом том о места подачения на места места подачения на подачения на места подач	Depleted of Spirit Control of the Spirit Con	and a state of the							
4.2	Chase			Last 4 digits of account number	\$	1,982.00				
	Nonpriority Creditor's Name			When was the debt incurred? 12/14/2009	T					
	POB 15298			AND THE COLUMN ASSESSMENT OF THE COLUMN ASSESS						
	Number Street			-						
	Wilmington	DE	19850	As of the date you file, the claim is: Check all that apply.						
	City	State	ZIP Code	☐ Contingent						
	Who incurred the debt? Check one.			Unliquidated						
	Debtor 1 only			Disputed						
	Debtor 2 only									
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:						
	At least one of the debtors and another			Student loans						
	☐ Check if this claim is for a commu	nity debt		<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>						
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts						
	☑ No			Other. Specify						
	Yes									
.3		ortotalesse en	on elektrologist (1882-1874), elektrologist (1882-1874), elektrologist (1882-1874), elektrologist (1882-1874),		m and worder with:	And the state of t				
	Target Nonpriority Creditor's Name			Last 4 digits of account number	_	913.00				
	· •			When was the debt incurred? 02/13/2012	\$	913.00				
	POB 673 Number Street			***************************************						
	Minneapolis	MN	55440							
	City	State	ZIP Code	As of the date you file, the claim is: Check all that apply.						
	Who incurred the debt? Check one.			☐ Contingent						
	Debtor 1 only			Unliquidated						
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only			☑ Disputed						
				_						
	At least one of the debtors and another			Type of NONPRIORITY unsecured claim:						
	Check if this claim is for a commun	.ta		Student loans						
		nty aept		Obligations arising out of a separation agreement or divorce						
	Is the claim subject to offset?			that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts						
	Mo No ☐ Yes			Other. Specify						
	- + US			-						

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Part 2:

				gget verig every	
After listing any entries on this pag	je, number th	em beginning wi	th 4.4, followed by 4.5, and so forth.	Total claim	
Carmax Auto Finance			Last 4 digits of account number	\$ 5,334.00	
2040 Thalbro Street			When was the debt incurred? 01/10/2015		
Number Street Richmond	VA	23230	As of the date you file, the claim is: Check all that apply.		
City	City State ZIP Code		Contingent		
Miles in account of the second			☐ Unliquidated		
Who incurred the debt? Check on	<b>e</b> .		Disputed		
Debtor 1 only					
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
At least one of the debtors and an	other		Student loans		
Check if this claim is for a co			Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
Is the claim subject to offset?	•		Debts to pension or profit-sharing plans, and other similar debts		
☑ No			Other. Specify		
Yes	Избанійні ў кайшты кампану снажаў сустыў кусу	enne e englag e en e	BUILD ANN HELD HELD STORM STOR		
5   Spring Leaf Financial			Last 4 digits of account number	\$_5,750.00	
Nonpriority Creditor's Name 601 NW 2nd Street			When was the debt incurred? 03/12/2015		
Number Street		-	The state of the s		
Evansville	IN	47708	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
Who incurred the debt? Check one			☐ Unliquidated		
Debtor 1 only	<b>:</b> .		Disputed		
Debtor 2 only					
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
At least one of the debtors and and	other		Student loans		
			Obligations arising out of a separation agreement or divorce that		
Check if this claim is for a con	nmunity debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts		
Is the claim subject to offset?			Other. Specify		
☑ No ☐ Yes					
	Proportion and acceptance of the second seco	and developed the security of		\$ 54,935.00	
Federal Loan Servicing Nonpriority Creditor's Name			Last 4 digits of account number		
POB 60610 Number Street			When was the debt incurred? 02/10/2015		
Harrisburg	PA	17106	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
Who incurred the debt? Check one.			Unliquidated		
☑ Debtor 1 only			Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only					
At least one of the debtors and another	ther		Olddor louis		
☐ Check if this claim is for a com	munity debt		you did not report as priority claims		
Is the claim subject to offset?	·		Debts to pension or profit-sharing plans, and other similar debts		
☑ No			Other. Specify		
Yes					

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Part 2:

After listi	ting any entries on this page, nu	ımber th	em beginning wit	h 4.4, followed by 4.5, and so forth.	Tot	al claim			
Vor	Von Maur  Last 4 digits of account number								
•	niority Creditor's Name			When was the debt incurred? 09/07/2012	V	0.00			
656 Numb	65 Brady ber Street			Ashell was the dept fuchted to 2012 to 17					
	venport	ΙA	52806	As of the date you file, the claim is: Check all that apply.					
City		State	ZIP Code	Contingent					
				Unliquidated					
	incurred the debt? Check one.			Disputed					
	Debtor 1 only								
	Debtor 2 only			Type of NONPRIORITY unsecured claim:					
	Debtor 1 and Debtor 2 only			☐ Student loans					
	At least one of the debtors and another  Check if this claim is for a community debt			Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
		, 4021		Debts to pension or profit-sharing plans, and other similar debts					
□ N	e claim subject to offset?			Other. Specify					
U Y	••								
₃] CB/	Victoria Secret	A PARTICLE AND STREET STREET,	iller dellerikken, kildeligiseljan vilsem den y verhore litje estrenoger en ermonen, en ermonen, en	Last 4 digits of account number	\$	0.00			
	riority Creditor's Name	***		00/07/0040					
POE	B 182789			When was the debt incurred? 09/27/2012					
Numbe				As of the date you file, the claim is: Check all that apply.					
City	lumbus	OH	43218						
City		State	ZIP Code	Contingent					
Who	incurred the debt? Check one.			Unliquidated Disputed					
Ū De	Pebtor 1 only			Cal Disputed					
	Pebtor 2 only			Type of NONPRIORITY unsecured claim:					
D De	Pebtor 1 and Debtor 2 only			Student loans					
☐ At	t least one of the debtors and another			Obligations arising out of a separation agreement or divorce that					
Пс	heck if this claim is for a commu	site dabt		you did not report as priority claims					
		nty dept		Debts to pension or profit-sharing plans, and other similar debts					
Is the	e claim subject to offset?			Other. Specify					
☐ No ☐ Ye	•								
1 211	Dept of Education	rigens es estatus sasuus asigu	igati ng maggagana na taumana na magnatang ng maganing ng maganing ng maganing	Last 4 digits of account number	\$	0.00			
Nonprio	iority Creditor's Name		v-1 ft	THE STATE OF THE S					
POB	B 5609			When was the debt incurred? 08/17/2012					
Number									
	enville	TX	75403	As of the date you file, the claim is: Check all that apply.					
City		State	ZIP Code	Contingent					
Who i	incurred the debt? Check one.			Unliquidated					
	ebtor 1 only			Disputed					
	eptor 1 only ebtor 2 only			Type of MONDRIODITY upon some distance					
	ebtor 2 only ebtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:					
	t least one of the debtors and another			Student loans					
				Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	heck if this claim is for a commun claim subject to offset?	ity debt		Debts to pension or profit-sharing plans, and other similar debts					
☐ No				Other. Specify					
Ye:									

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Part 2:

Afte	r listing any entries on this page, n	umber th	em beginning wi	th 4.4, followed by 4.5, and so forth.	T.	otal claim
.10	Tek Collect			Last 4 digits of account number	s 608.0	
	Nonpriority Creditor's Name POB 1269			When was the debt incurred? 01/06/2015	<b>Ф</b>	
	Number Street					
	Columbus	ОН	43216	As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code	Contingent		
	Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed		
	Debtor 1 only			Lisputed		
	Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only			☐ Student loans		
	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that		
	Check if this claim is for a commu	nity debt		you did not report as priority claims		
	Is the claim subject to offset?	•		Debts to pension or profit-sharing plans, and other similar debts		
	☑ No			Other. Specify		
	Yes					
1	CMRE Financial	ન કરવામાં આવેલા કરો હતો. 	YBC YMRAEAL III AM BINBLAID DIRBANG ACCEPT CEACLAIG COACHAIL CEACHAIL CEACHA	Last 4 digits of account number	\$	125.00
	Nonpriority Creditor's Name			04/20/2040	,	
	3075 E Imperial Highway			When was the debt incurred? 01/22/2016		
	Number Street Brea	O 4	00004	As of the date you file, the claim is: Check all that apply.		
	City	CA State	92821 ZIP Code			
	•	Ciaco	oode	Contingent Unliquidated		
1	Who incurred the debt? Check one.			Disputed		
	Debtor 1 only					
	Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only			Student loans		
4	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that		
(	Check if this claim is for a communication	nity debt		you did not report as priority claims		
ı	s the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts		
	<b>☑</b> No			Other, Specify		
	Yes					
<u>]</u> (	Credit Collection Services	t to the control of t	TALL METHODA ORGANISA (ARABIYA KARINGANIKA PARAMAKAN TALAKAN ARABIYA	Last 4 digits of account number	\$	66.00
	Ionpriority Creditor's Name			0014510040		
-	POB 710			When was the debt incurred? 02/15/2016		
	lumber Street Norwood	MA	02062	As of the date you file, the claim is: Check all that apply.		
Č	ity	State	ZIP Code	Contingent		
1,1	Vho incurred the debt? Check one.			☐ Unliquidated		
	Debtor 1 only			■ Disputed		
	Debtor 1 only Debtor 2 only			Tour (Management		
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another			Student loans		
				Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	Check if this claim is for a commun	ity debt		Debts to pension or profit-sharing plans, and other similar debts		
	the claim subject to offset?			Other. Specify		
-	<b>1</b> No					

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Part 2:

	er listing any entries on this page, nur	After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.							
4.13	Harvard Collection Services			Last 4 digits of account number	s 1,164.00				
	Nonpriority Creditor's Name 4839 N. Elston				·				
	Number Street Chicago	IL	60630	As of the date you file, the claim	is: Check all that apply				
		State	ZIP Code		ioi onone on that appry.				
	Who incurred the debt? Check one.			Contingent Unliquidated Disputed					
	Debtor 2 only			Type of NONPRIORITY unsecur	ad alaim.				
	Debtor 1 and Debtor 2 only			·	eo ciaim:				
	At least one of the debtors and another			Student loans					
	Check if this claim is for a communi	ihr daht		Obligations arising out of a separ you did not report as priority clain	ation agreement or divorce that				
		ity debt		Debts to pension or profit-sharing	plans, and other similar debts				
	Is the claim subject to offset?			Other. Specify					
	☐ No ☐ Yes								
4.14	tion to commence of a distribute of the control of	resident enddod en Cantologyssissena	kkatalanta eta eta biskata kapan kapan katan katan serren berapan berapan berapan keta biskata biskata biskata		teedikeen-vaasta ka keesti kuluutiinka mista mista mista ka keesti ka				
	Caine & Weiner Nonpriority Creditor's Name			Last 4 digits of account number		\$ <u>398.00</u>			
	21210 Erwin Street			When was the debt incurred?					
		CA	91367	As of the date you file, the claim	is: Check all that apply.				
		State ZIP Code							
				☐ Unliquidated					
	Who incurred the debt? Check one.			☐ Disputed					
	Debtor 1 only								
	Debtor 2 only			Type of NONPRIORITY unsecure	ed claim;				
	Debtor 1 and Debtor 2 only			Student loans					
	At least one of the debtors and another			Obligations arising out of a separa	ation agreement or divorce that	•			
	☐ Check if this claim is for a communit	y debt		you did not report as priority claim	S				
	Is the claim subject to offset?			Debts to pension or profit-sharing	plans, and other similar debts				
	™ No			Other, Specify					
	☐ Yes								
1.15		200000000000000000000000000000000000000	e en el mentre en	Last 4 digits of account number	PANTATAT PANTATAN PANTAT P	\$ <u>347.00</u>			
	ERC Nonpriority Creditor's Name			mar 4 mights of accornic limitable.					
	POB 57547 Number Street			When was the debt incurred?	10/27/2015				
		=L	32241	As of the date you file, the claim is	s: Check all that apply.				
ì	City St	ate	ZIP Code	☐ Contingent					
1	Miles in success of the state o			☐ Unliquidated					
	Who incurred the debt? Check one.			Disputed					
	Debtor 1 only Debtor 2 only								
				Type of NONPRIORITY unsecured	d claim:				
	Debtor 1 and Debtor 2 only  At least one of the debtors and another			☐ Student loans					
				Obligations arising out of a separat	tion agreement or divorce that	:			
-	Check if this claim is for a community	y debt		you did not report as priority claims	3				
1	s the claim subject to offset?			Debts to pension or profit-sharing p  Other. Specify					
	■ No			Other. Specify					
	☐ Yes								

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Part 49

## Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	+\$	0.00
	6e. <b>Total.</b> Add lines 6a through 6d.	6e.	\$	0.00
			Total claim	
Total claims	6f. Student loans	6f.	\$	54,935.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	<ol><li>Other. Add all other nonpriority unsecured claims. Write that amount here.</li></ol>	6i.	+ \$	0.00
	6j. <b>Total.</b> Add lines 6f through 6i.	6j.	\$	73,054.00

Case 16-23725 Doc 1 Filed 07/25/16 Entered 07/25/16 11:44:18 Desc Main Page 29 of 50 Document Fill in this information to identify your case: Trenae Shafon Drane Debtor Middle Name Last Name Debtor 2 (Spouse If filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Case number Check if this is an (If known) amended filing Official Form 106G Schedule G: Executory Contracts and Unexpired Leases 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known). 1. Do you have any executory contracts or unexpired leases? No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B). 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases. Person or company with whom you have the contract or lease State what the contract or lease is for 2.1 Name Number Street City State ZIP Code 2.2 Name Number Street City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street

City

ZIP Code

State

		Case 10-23/25	DOCT FI	en 01152110			/10 11.44.18 Desc Mail	
Fill	in this i	nformation to identify y	our case:		Harrie (H)	of 50		
Deb	tor 1	Trenae Shafon Dran	•					
		First Name	Middle Name	Last Name				
	tor 2 use, if filing	j) First Name	Middle Name	Last Name				
Unit	ed States	Bankruptcy Court for the: N	orthern District of III	inois				
	e number							
	nown)						☐ Check i	if this is an
							amende	ed filing
Off	icial	Form 106H						
Sc	hed	ule H: Your	Codebtor	S				12/15
and n case  1. [  ( 2. \)	Do you had no you had no you had no you had no yes.	the entries in the boxes (if known). Answer even ave any codebtors? (if the last 8 years, have your California, Idaho, Louisia Go to line 3.  Did your spouse, former lo	on the left. Attachery question.  you are filing a joint u lived in a communa, Nevada, New M spouse, or legal equestate or territory did	case, do not list e	ither spouse as te or territory' o, Texas, Wash ou at the time?	ge. On the s a codebt ? (Communington, an	nity property states and territories include	ir name and
	1	Number Street						
	ō	Dity	State		ZIP Code			
s 5	shown ii Schedul Schedul	n line 2 again as a code	btor only if that pe ), <i>Schedule E/F</i> (Of	rson is a guarant	or or cosigne	r. Make su le G (Offic	rouse is filing with you. List the person re you have listed the creditor on ial Form 106G). Use Schedule D,  umn 2: The creditor to whom you owe t	
						Ch	eck all schedules that apply:	
3.1						[m]	O be data D. Bur	
	Name						Schedule D, line Schedule E/F, line	
	Number	Street					Schedule G, line	
	C#+						3, mo	
3.2	City		State	•	ZIP Code			:
0.2	Name						Schedule D, line	
							Schedule E/F, line	
	Number	Street				<u> </u>	Schedule G, line	:
	City		State		ZIP Code			
3.3						[T]	Cahadula D. lin-	
	Name		***************************************				Schedule D, line Schedule E/F, line	
	Number	Street			····		Schedule G, line	:
	<u> </u>							1
	City		State		ZIP Code			

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Case number (# known) Document

Trenae Shafon Drane Debtor 1

Middle Name

Last Name

		For	Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	. 🍑 4.	\$	0.00	\$	
5. List all payroll deductions:					
5a. Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	
5b. Mandatory contributions for retirement plans	5b.	\$	0.00	\$	
5c. Voluntary contributions for retirement plans	5c.	\$	0.00	\$	
5d. Required repayments of retirement fund loans	5d.	\$	0.00	\$	
5e. Insurance	5e.	\$	0.00	\$	
5f. Domestic support obligations	5f.	\$	0.00	\$	
5g. Union dues	5g.	\$	0.00	\$	
5h. Other deductions. Specify:	5h.	+\$	0.00	+ \$	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h	h. 6.	\$	0.00	\$ 0.00	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	
8. List all other income regularly received:					
8a. Net income from rental property and from operating a business, profession, or farm					
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	
8b. Interest and dividends	8b.	\$	0.00	\$	
8c. Family support payments that you, a non-filing spouse, or a depend regularly receive	lent	-		-	
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	
8d. Unemployment compensation	8d.	\$	0.00	\$	
8e. Social Security	8e.	\$	0.00	\$	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assista that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: food stamps	ince 8f.	\$	194.00	\$	
8g. Pension or retirement income		•	0.00	**************************************	
	8g.	\$	*******	\$	
8h. Other monthly income. Specify:  9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	8h. 9.	+\$ *	0.00 194.00	* 0.00	
10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	194.00	s=	<u>\$ 194.00</u>
<ol> <li>State all other regular contributions to the expenses that you list in Schellingling contributions from an unmarried partner, members of your household, friends or relatives.</li> </ol>	your de	pender			
Do not include any amounts already included in lines 2-10 or amounts that are Specify:			o pay expense	s listed in <i>Schedule J.</i>	\$0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain S	result Statistic	is the co al Inforr	ombined month mation, if it app	- nlv income.	\$ 194.00 Combined
13. Do you expect an increase or decrease within the year after you file this f	form?				monthly income
☐ Yes. Explain:					

Filed 07/25/16 Case 16-23725 Doc 1 Entered 07/25/16 11:44:18 Document Page 33 of 50 Fill in this information to identify your case: Trenae Shafon Drane Debtor 1 Check if this is: Debtor 2 An amended filing (Spouse, if filing) First Name Middle Name Last Name ☐ A supplement showing postpetition chapter 13 United States Bankruptcy Court for the: Northern District of Illinois expenses as of the following date: MM / DD / YYYY (If known) Official Form 106J Schedule J: Your Expenses 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: **Describe Your Household** 1. Is this a joint case? Mo. Go to line 2. Yes. Does Debtor 2 live in a separate household? Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? ☑ No Dependent's relationship to Dependent's Does dependent live Do not list Debtor 1 and Yes. Fill out this information for Debtor 1 or Debtor 2 with you? age Debtor 2. each dependent..... ☐ No Do not state the dependents' names. Yes ☐ No Yes ☐ No ☐ Yes □ No Yes ☐ No Yes 3. Do your expenses include **Ø** No expenses of people other than Yes yourself and your dependents? **Estimate Your Ongoing Monthly Expenses** Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) Your expenses 4. The rental or home ownership expenses for your residence. Include first mortgage payments and 0.00 any rent for the ground or lot. 4. If not included in line 4: Real estate taxes 0.00 4a. 4b. Property, homeowner's, or renter's insurance 0.00 4b.

Home maintenance, repair, and upkeep expenses

Homeowner's association or condominium dues

0.00

0.00

4c.

4d.

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Debtor 1

Trenae Shafon Drane

Last Name

Case number (if known)_

Specify:				Your exp	enses
Sea   Electricity, heat, natural ges   0.00	5	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6.6   Water, sewer, garbage collection   6.6   0.000	6	Utilities:			
6b. Water, sewer, garbage collection   6b.   \$   0.00     6c. Telephone, cell phone, Internet, satellite, and cable services   6c.   \$   145,00     6c. Other, Specify:		6a. Electricity, heat, natural gas	6a.	\$	0.00
Sc.   Telephone, cell phone, Internet, satellite, and cable services   6c.   8c.   145,00		6b. Water, sewer, garbage collection		\$	
64		6c. Telephone, cell phone, Internet, satellite, and cable services		\$	
7. Food and housekeeping supplies         7. \$ \$ .000.00           8. Childcare and children's education costs         8. \$ .0.00           9. Clothing, laundry, and dry cleaning         9. \$ .0.00           10. Personal care products and services         10. \$ .0.00           11. Medical and dental expenses         11. \$ .0.00           12. Transportation, include gas, maintenance, bus or train fare. Do not include car payments.         12. \$ .0.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13. \$ .0.00           14. Charitable contributions and religious donations         14. \$ .0.00           15. Insurance.         15a. Life insurance deducted from your pay or included in lines 4 or 20.         15b. Lealth insurance specify.         15c. \$ .0.00           15b. Health insurance. Specify.         16b. Other insurance. Specify.         16c. \$ .0.00           15c. Vehicle insurance. Specify.         16c. \$ .0.00           15b. Vehicle insurance specify.         16c. \$ .0.00           15c. Vehicle insurance. Specify.         16c. \$ .0.00           15c. Other insurance. <td< td=""><td></td><td>6d. Other. Specify:</td><td>6d.</td><td>\$</td><td></td></td<>		6d. Other. Specify:	6d.	\$	
3. Clothing, laundry, and dry cleaning         9. \$ \$ 0.00           10. Personal care products and services         10. \$ \$ 0.00           11. Medical and dental expenses         11. \$ 0.00           12. Transportation, Include gas, maintenance, bus or train fare. Do not include car payments.         12. \$ 0.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13. \$ 0.00           14. Charitable contributions and religious donations         14. \$ 0.00           15. Insurance.         15. \$ 0.00           15. Life insurance deducted from your pay or included in lines 4 or 20.         15. \$ 0.00           15. Life insurance         15. \$ 0.00           15. Vehicle insurance         15. \$ 0.00           15. Vehicle insurance. Specify:         15. \$ 0.00           16. Other insurance. Specify:         15. \$ 0.00           16. Other insurance. Specify:         16. \$ 0.00           17. Care payments for Vehicle 1         17. \$ 0.00           17. Care payments for Vehicle 1         17. \$ 0.00           17. Care payments for Vehicle 2         17. \$ 0.00           17. Cother. Specify:         17. \$ 0.00           17. Cother. Specify:         17. \$ 0.00           17. Cother. Specify:         17. \$ 0.00           18. Vour payments of alimony, maintenance, and support that you did not report as deducted from	7.		7.	\$	194.00
9. Clothing, laundry, and dry cleaning         9. \$         0.00           10. Personal care products and services         10. \$         0.00           11. Medical and dental expenses         11. \$         0.00           12. Transportation, Include gas, maintenance, bus or train fare. Do not include car payments.         12. \$         0.00           13. Entertainment, clubs, recreation, nowspapers, magazines, and books         13. \$         0.00           14. Charitable contributions and religious donations         14. \$         0.00           15. Insurance.         15. Insurance         15. \$         0.00           15. Life insurance deducted from your pay or included in lines 4 or 20.         15. \$         0.00           15. Least insurance.         15. \$         0.00           15. Life insurance.         15. \$         0.00           15. Least insurance.         15. \$         0.00           15. Chier insurance.         15. \$         0.00           15. Chier insurance.         15. \$         0.00           15. Chier in	8.	Childcare and children's education costs		\$	0.00
10.         Personal care products and services         10.         \$         0.00           11.         Medical and dental expenses         11.         \$         0.00           12.         Transportation, Include gas, maintenance, bus or train fare. Do not include car payments.         12.         \$         0.00           13.         Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$         0.00           14.         Charitable contributions and religious donations         14.         \$         0.00           15.         Insurance.         15.         \$         0.00           15.         Life insurance deducted from your pay or included in lines 4 or 20.         156.         \$         0.00           15.         Health insurance         156.         \$         0.00           15.         Health insurance         156.         \$         0.00           15.         Health insurance. Specify:         156.         \$         0.00           15.         Health insurance.         \$         0.00           15.         Health insurance.         \$         0.00           15.         Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.         \$         0.00           17.	9.	Clothing, laundry, and dry cleaning		s	0.00
11. Medical and dental expenses         11. \$         \$0.00           12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.         12. \$         \$0.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13. \$         \$0.00           14. Chartable contributions and religious donations         15. \$         \$0.00           15. Insurance.         15a. Life insurance         15a. \$         \$0.00           15b. Health insurance         15b. \$         \$0.00           15c. Vehicle insurance         15c. \$         \$0.00           15c. Vehicle insurance. Specify:         15c. \$         \$0.00           15c. Vehicle insurance. Specify:         16c. \$         \$0.00           17c. Installment or lease payments:         17c. \$         \$0.00           17c. Car payments for Vehicle 1         17c.	10.	Personal care products and services			0.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.         12. \$ 0.000           13. Enterfalment, clubs, recreation, newspapers, magazines, and books         13. \$ 0.000           14. Charitable contributions and religious donations         14. \$ 0.000           15. Insurance.         15a. Life insurance deducted from your pay or included in lines 4 or 20.         15a. Life insurance         15a. \$ 0.00           15b. Health insurance         15b. Health insurance         15c. Vehicle insurance         15c. \$ 0.00           15c. Vehicle insurance         15d. 0.000         15d. 0.00           15c. Vehicle insurance. Specify:         15d. 0.000           15d. Other insurance. Specify:         15d. 0.000           15d. Other Specify:         15d. 0.000           17d. Other Specify:         17d. 0.000           17d. Car payments for Vehicle 1         17a. 0.000           17d. Other. Specify:         17d. 0.000           17d. Other. Specify: <td< td=""><td>11.</td><td>Medical and dental expenses</td><td></td><td>\$</td><td></td></td<>	11.	Medical and dental expenses		\$	
12   13	12.	Transportation. Include gas, maintenance, bus or train fare.			0.00
1.4. Charitable contributions and religious donations         14. \$ 0.00           1.5. Insurance.         3. \$ 0.00           1.5. Life insurance         15a. \$ 0.00           1.5b. Health insurance         15b. \$ 0.00           1.5c. Vehicle insurance         15c. \$ 140.00           1.5d. Other insurance. Specify:		Do not include car payments.	12.	\$	0.00
15.   Insurance	13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
15a    Life insurance   15a    5	14.	Charitable contributions and religious donations	14.	\$	0.00
15a. Life insurance         15a. Pealth insurance         15b. Pealth insurance	15.				
15b. Health insurance		Do not include insurance deducted from your pay or included in lines 4 or 20.			
15c. Vehicle insurance       15c. \$ 140.00         15d. Other insurance. Specify:		15a. Life insurance	15a.	\$	0.00
15d. Other insurance. Specify:		15b. Health insurance	15b.	\$	0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:			15c.	\$	140.00
Specify:		15d. Other insurance. Specify:	15d.	\$	0.00
Specify:	16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20			
17. Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17b. Car payments for Vehicle 2  17c. Other. Specify:  17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  18. \$  0.00  19. Other payments you make to support others who do not live with you.  Specify:  19. \$  0.00  Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a. \$  0.00  20b. Real estate taxes  20c. \$  0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses			16.	\$	0.00
17b. Car payments for Vehicle 2  17b. Cother. Specify: 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. Specify: 18b. Specify: 18b. Specify: 19b. Speci	17.	Installment or lease payments:			
17c. Other. Specify: 17d. Specify: 17d. Specify: 17d. Specify: 17d. Specify: 18d. Specify: 18d. Specify: 19d. Spec		17a. Car payments for Vehicle 1	17a.	\$	0.00
17d. Other. Specify:		17b. Car payments for Vehicle 2	17b.	\$	0.00
17d. Other. Specify:		17c. Other. Specify:	17c.	\$	0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20b. Real estate taxes  20c. \$  0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses			17d.		0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.  Specify:	18.				
Specify:		your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
Specify:	19.	Other payments you make to support others who do not live with you.			
20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. \$ 0.00 20a. \$ 0.00 20b. \$ 0.00 20c. Property, homeowner's insurance 20c. \$ 0.00 20d. \$ 0.00		<del>-</del>	19.	\$	0.00
20a. Mortgages on other property       20a. \$					. N - 1 7 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
20b. Real estate taxes  20b. \$ 0.00  20c. Property, homeowner's, or renter's insurance  20c. \$ 0.00  20d. Maintenance, repair, and upkeep expenses  20d. \$ 0.00				\$	0.00
20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00		20b. Real estate taxes			
20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00					
				_	

Entered 07/25/16 11:44:18 Desc Main Case 16-23725 Doc 1 Filed 07/25/16 Document Page 35 of 50 Trenae Shafon Drane Debtor 1 Case number (if known) Last Name 21. Other. Specify: 0.00 21. 22. Calculate your monthly expenses. 22a. Add lines 4 through 21. 479.00 22a. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22b. 0.00 22c. Add line 22a and 22b. The result is your monthly expenses. 22c. 479.00 23. Calculate your monthly net income. 194.00 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. 23b. Copy your monthly expenses from line 22c above. 479.00 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. -285.00 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? M No.

Yes.

Explain here:

Case 16-23725 Doc 1 Filed 07/25/16 Entered 07/25/16 11:44:18 Desc Main Document Page 36 of 50 Fill in this information to identify your case: Trenae Shafon Drane Debtor 1 Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Case number (If known) ☐ Check if this is an amended filing Official Form 106Dec **Declaration About an Individual Debtor's Schedules** 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? M/ No ☐ Yes. Name of person_ . Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X Signature of Debtor 2 Date 07/15/2016 MM / DD / YYYY MM / DD / YYYY

Case 16-23725 Doc 1 Filed 07/25/16 Entered 07/25/16 11:44:18 Desc Main Document Page 37 of 50 Fill in this information to identify your case: Trenae Shafon Drane Debtor 1 Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Check if this is an (If known) amended filing Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? ■ Married Not married 2. During the last 3 years, have you lived anywhere other than where you live now? M No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1: Dates Debtor 1 Debtor 2: **Dates Debtor 2** lived there lived there Same as Debtor 1 Same as Debtor 1 From From Number Street Number Street To To City State ZIP Code State ZIP Code Same as Debtor 1 Same as Debtor 1 From Number Number Street To City State ZIP Code City State ZIP Code 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) MO NO Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Part 2:

**Explain the Sources of Your Income** 

4.	Did you have any income from employmer Fill in the total amount of income you receive If you are filing a joint case and you have inco	d from all jobs and all busi	nesses, including part-tir	me activities.	endar years?
	☐ No ☑ Yes. Fill in the details.				
		Deptor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips  Operating a business	\$6,000.00	Wages, commissions, bonuses, tips Operating a business	\$
	For last calendar year: (January 1 to December 31,2015	Wages, commissions, bonuses, tips  Operating a business	\$21,000.00	Wages, commissions, bonuses, tips Operating a business	\$
	For the calendar year before that:  (January 1 to December 31, 2014	Wages, commissions, bonuses, tips  Operating a business	\$ 21,000.00	Wages, commissions, bonuses, tips Operating a business	\$
	Include income regardless of whether that inc		of other income are alim	iony; child support; Social :	Security,
	unemployment, and other public benefit paym gambling and lottery winnings. If you are filing List each source and the gross income from e No Yes. Fill in the details.	a joint case and you have ach source separately. Do	income that you receive	money collected from laws ed together, list it only once you listed in line 4.	suits; royalties; and
	gambling and lottery winnings. If you are filing List each source and the gross income from e	a joint case and you have	income that you receive	money collected from laws ed together, list it only once	suits; royalties; and
	gambling and lottery winnings. If you are filing List each source and the gross income from e	a joint case and you have a joint case and you have each source separately. Do  Debtor 1  Sources of income  Describe below.	Gross income from each source (before deductions and exclusions)	money collected from laws ed together, list it only once you listed in line 4.  Debtor 2  Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	gambling and lottery winnings. If you are filing List each source and the gross income from e  No  Yes. Fill in the details.  From January 1 of current year until	a joint case and you have each source separately. Do  Debtor 1  Sources of income  Describe below.	Gross income from each source (before deductions and exclusions)	money collected from laws ed together, list it only once you listed in line 4.  Debtor 2  Sources of income Describe below.	Gross income from each source (before deductions and exclusions)  \$
	gambling and lottery winnings. If you are filing List each source and the gross income from e  No Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:  For last calendar year: (January 1 to December 31,)	a joint case and you have each source separately. Do  Debtor 1  Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	money collected from laws ed together, list it only once to you listed in line 4.  Debtor 2  Sources of income Describe below.	Gross income from each source (before deductions and exclusions)  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$

Debtor 1

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Debtor 1

Part 3:

	Dogamon . aq	go <b>oo</b> o. <b>oo</b>
Trenae Shafon Drane		Case number (# known)

List Certain Payments You Made Before You Filed for Bankruptcy

Are e	ither D	ebtor 1's or Deb	tor 2's deb	ts primarily c	onsumer deb	ts?		
☐ N	lo. <b>Ne</b> i	ither Debtor 1 no curred by an indivi	or Debtor 2 idual primar	has primarily ily for a persor	consumer de	ebts. Consumer debts a nousehold purpose."	re defined in 11 U.S.C. § 10	1(8) as
	Du	ring the 90 days b	efore you fil	ed for bankrup	otcy, did you p	ay any creditor a total of	f \$6,225* or more?	
		No. Go to line 7.						
		total amoun	t you paid th	nat creditor. Do	not include p	\$6,225* or more in one ayments for domestic so nents to an attorney for	or more payments and the upport obligations, such as this bankruptcy case.	
	* S	ubject to adjustme	ent on 4/01/	16 and every 3	years after th	at for cases filed on or a	after the date of adjustment.	
Ø Y	es. <b>De</b> l	btor 1 or Debtor	2 or both h	ave primarily	consumer de	bts.		
						ay any creditor a total of	\$600 or more?	
	囡	No. Go to line 7.						
		creditor. Do	not include	payments for	domestic supp	\$600 or more and the to out obligations, such as ey for this bankruptcy ca	otal amount you paid that child support and see.	
					Dates of payment	Total amount paid	Amount you still owe	Was this payment for
						\$	\$	☐ Mortgage
		Creditor's Name			***************************************			Car
				<u>_</u> _				Credit card
		Number Street						Loan repayment
		<del></del>		<del></del>	<del></del>			Suppliers or vendor
		City	State	ZIP Code				Other
		Oily	Glate	Zir Code				
						\$	\$	Mortgage
		Creditor's Name		***************************************	<del></del>			Car
			·					Credit card
		Number Street						Loan repayment
								Suppliers or vendors
		C.L.	Si-t-	710.0-4				Suppliers or vendors Other
		City	State	ZIP Code				
		City	State	ZIP Code		\$	_ \$	Other
		City  Creditor's Name	State	ZIP Code	AND THE RESERVE AND THE RESERV	\$	_ \$	Other
		Creditor's Name	State	ZIP Code	MINUTE AND A STATE OF THE STATE	\$	\$	Other
			State	ZIP Code	NIII AND	\$	\$	Other  Mortgage Car Credit card
		Creditor's Name	State	ZIP Code		\$	\$	Other

Case 16-23725 Doc 1 Filed 07/25/16 Entered 07/25/16 11:44:18 Document Page 40 of 50 Trenae Shafon Drane Debtor 1 Case number (if known) Middle Name **Last Name** 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. **⊠** No ☐ Yes. List all payments to an insider. Dates of Total amount Amount you still Reason for this payment payment paid Insider's Name Street ZIP Code Insider's Name Number Street State ZIP Code 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. M No 

Yes. List all payments th	at benefited	an insider.				
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name				\$	\$	
Number Street	**************************************		***			
100 100 100 100 100 100 100 100 100 100						
City	State	ZIP Code				
				\$	\$	

City

Insider's Name

Number Street

State

ZIP Code

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	Document	Page 41 01 50
btor 1	Trenae Shafon Drane First Name Middle Name Last Name	Case number (# known)

and	thin 1 year before you filed for bankrupto t all such matters, including personal injury of d contract disputes.	y, were you a party in any cases, small claims actions,	lawsuit, court action, or divorces, collection suits,	administrative procepaternity actions, sup	eeding? oport or custody modifica
g	No				
	Yes. Fill in the details.				
		Nature of the case	Court or agency		Status of the cas
	Case title		Court Name		Pending
					On appeal
			Number Street		☐ Concluded
	Case number				
			City	State ZIP Code	
	Case title		Court Name		Pending
					On appeal
			Number Street		Concluded
	Case number				
			City	State ZIP Code	
		Describe the proper	t <b>y</b>	Date	Value of the propert
	Creditor's Name	Describe the proper	t <b>y</b>	Date	Value of the property
		•		Date	
	Creditor's Name  Number Street	Describe the proper		Date	
		Explain what happe	ned repossessed.	Date	
		Explain what happe  Property was	ned repossessed. foreclosed.	Date	Value of the property
	Number Street	Explain what happe Property was a Pr	ned repossessed. foreclosed. gamished.		
		Explain what happe Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied		
	Number Street	Explain what happe Property was a Pr	ned repossessed. foreclosed. garnished. attached, seized, or levied		\$
	Number Street  City State ZIP Code	Explain what happe Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied	•	
	Number Street	Explain what happe Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied	•	\$Value of the propert
	Number Street  City State ZIP Code	Explain what happe Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied	•	\$Value of the propert
	Number Street  City State ZIP Code  Creditor's Name	Explain what happe Property was a Property was a Property was a Property was a Describe the propert	ned repossessed. foreclosed. garnished. attached, seized, or levied by	•	\$Value of the propert
	Number Street  City State ZIP Code  Creditor's Name	Explain what happe Property was a Pr	repossessed. foreclosed. garnished. attached, seized, or levied by	•	\$Value of the proper
	Number Street  City State ZIP Code  Creditor's Name	Explain what happe Property was a Property was a Property was a Property was a Describe the propert	ned repossessed. foreclosed. garnished. attached, seized, or levied by  led epossessed. preclosed.	•	\$Value of the proper

Trenae Shafon Drane Debtor 1 Case number (if known) Middle Name Last Name 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? ZI No Yes. Fill in the details. Describe the action the creditor took Date action Amount was taken Creditor's Name 0.00 Number Street State ZIP Code Last 4 digits of account number: XXXX-12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? MO No ☐ Yes Part 5: **List Certain Gifts and Contributions** 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift Number Street State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you _

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Page 43 of 50 Document Trenae Shafon Drane Debtor 1 Case number (it kno First Name Middle Name Last Name 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? **Ø** No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities Describe what you contributed Date you Value that total more than \$600 contributed Charity's Name Number Street City State ZIP Code Part 6: **List Certain Losses** 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? M No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: **List Certain Payments or Transfers** 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. 2 No Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment transfer was Person Who Was Paid made Number Street City State ZIP Code Email or website address Person Who Made the Payment, if Not You

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Doc 1

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Trenae Shafon Drane Debtor 1 Case number (if known) Last Name Description and value of any property transferred Date payment or Amount of transfer was made payment Person Who Was Paid Number Street City ZIP Code Email or website address Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. M No Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment Person Who Was Paid Number Street City State ZIP Code 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. **V** No Yes. Fill in the details. Description and value of property Describe any property or payments received Date transfer transferred or debts paid in exchange was made Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you Person Who Received Transfer Number Street

State

Person's relationship to you __

ZIP Code

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			Doddinone	· ago	3 10 01 00	
Debtor 1	Trenae Sh	afon Drane	Last Name		Case number (# known)	

No				
Yes. Fill in the details.				
	Description and value of the prope	·		Date transfer was made
		A		
Name of trust	****			
				4
8: List Certain Financial Accour	nts. Instruments. Safe Deposit	Boyes and Stores	a Ilmite	annum an
	· · · · · · · · · · · · · · · · · · ·			
ithin 1 year before you filed for bankru	ptcy, were any financial accounts of	or instruments held in	your name, or for your	benefit,
osed, sold, moved, or transferred? clude checking, savings, money marke	at or other financial accounts: cost	ificatoe of donocit; ch	roe in hanke aradit ur	iona
okerage houses, pension funds, coop			ires in Danks, credit un	iions,
No	eranves, associations, and other in	ianciai ilistitutions.		
Yes. Fill in the details.				
	i and distance of a constant			
	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved,	Last balance befo closing or transfe
			or transferred	
Name of Financial Institution		-		
	XXXX	Checking	***************************************	\$
Number Street	<del></del>	☐ Savings		
	mana-	Money market		
		☐ Brokerage		
City State ZIP Code	AND THE PROPERTY OF THE PROPER	Other		
	_ xxxx-	Checking		\$
Name of Financial Institution	Additional desiration virginian variables	☐ Savings		~ <del></del>
Number Street	<del></del>	Money market		
Number Street				
	<del></del>	☐ Brokerage		
		Other		
City State 719 Code	<del></del>			
City State ZIP Code	_			
you now have, or did you have within	1 year before you filed for bankrus	otcy, any safe deposit l	oox or other depositor	for
you now have, or did you have within curities, cash, or other valuables?	1 year before you filed for bankrup	otcy, any safe deposit l	oox or other depositor	/ for
you now have, or did you have within curities, cash, or other valuables? No	1 year before you filed for bankrup	otcy, any safe deposit l	oox or other depository	/ for
you now have, or did you have within curities, cash, or other valuables?				
you now have, or did you have within curities, cash, or other valuables? No	1 year before you filed for bankrup Who else had access to it?	otcy, any safe deposit l Describe the		/ for Do you stil have it?
you now have, or did you have within curities, cash, or other valuables? No				Do you stil have it?
you now have, or did you have within curities, cash, or other valuables? No Yes. Fill in the details.	Who else had access to it?			Do you stil have it?
you now have, or did you have within curities, cash, or other valuables? No				Do you stil have it?
you now have, or did you have within curities, cash, or other valuables? No Yes. Fill in the details.	Who else had access to it?			Do you stil have it?

Document Page 46 of 50 Trenae Shafon Drane Debtor 1 Case number (if known) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Who else has or had access to it? Describe the contents Do you still have it? Q No Name of Storage Facility Name T Yes Number Street Number Street City State ZiP Code City State ZIP Code Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. M No Yes. Fill in the details. Where is the property? Describe the property Value Owner's Name Number Street Number Street City State ZIP Code City State ZIP Code Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? 2 No Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State ZIP Code

City

ZIP Code

Case 16-23725

Doc 1

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	Case 1	6-23725	Doc 1	Filed 07/25/1 Document	6 Entered 07/ Page 47 of 5	25/16 11:44:18 0	Desc Main
Debtor 1		afon Drane			Cas	e number (if known)	
	First Name	Middle Name	Last Na	me	_	o riambor (minomi)	
25. Hav		y governmen	tal unit of a	any release of hazard	ous material?		
	No Yes. Fill in the d	_4_74_					
- Bereit	res. rm in the Q	etaiis.					
				Governmental unit	Environm	ental law, if you know it	Date of notice
	Name of site		7	Governmental unit	<del></del>		-
	Number Street		ĭ	Number Street			
			7	City State	ZiP Code		
	City	State Z	P Code				
	<b>-</b>						
	Yes. Fill in the de	etails.		Court or agency	Net	···· of the ····	Status of the
				Court or agency	Natu	re of the case	case
(	Case title	·····					П.,
				Court Name			Pending
-							On appeal
				Number Street			☐ Concluded
ä	Case number			City S	tate ZIP Code		
				Vily 0	tate Lir code		
Part 1	Give Deta	alls About Y	our Busin	ess or Connection	ns to Any Business	•	
27. With						the following connectio	no to any husiness?
[	A sole proprie	etor or self-en	ploved in	a trade, profession, c	or other activity, eithe	r full-time or part-time	ns to any pusifiess?
C	A member of	a limited liabi	lity compar	ny (LLC) or limited lis	ability partnership (LL	P)	
C	A partner in a	partnership				,	
	An officer, dir	ector, or man	aging exec	utive of a corporation	n		
	An owner of a	it least 5% of	the voting	or equity securities o	f a corporation		
	io. None of the a						
				the details below for	reach hueinees		
				Describe the nature of		Employer Identifi	estion number
							ocial Security number or ITIN.
	Business Name						role, country trainout of 114t,
						EIN:	
	Number Street			Mame of accountary as	haakkaanar		
				Name of accountant or	nookkeeper	Dates business e	xisted
						Ezom	To
	City	State 71	Cada			From	_ To

City

Business Name

Number Street

State

ZIP Code

Describe the nature of the business

Name of accountant or bookkeeper

Employer Identification number

Dates business existed

From _____ To ___

Do not include Social Security number or ITIN.

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	First Name Middle Name Last		se number (# known)
	FRST MOTHE MAIGH VAITHE LAST	Name	SE NUMBER (if known)
		Describe the nature of the business	Employer Identification number
		page in the initial of the publication	Do not include Social Security number or ITIN.
	Business Name		· ·
			EIN:
	Number Street	Name of accountant or bookkeeper	Dates business existed
		4	
	City State ZIP Code		From To
	5.17		
	No Yes. Fill in the details below.	Date issued	
	Name	MM / DD / YYYY	
	Number Street		
	City State ZIP Code		
112	3 Sign Below		
i na ans	ive read the answers on this <i>Statement</i> swers are true and correct. I understand	t of Financial Affairs and any attachments, and that making a false statement concealing	and I declare under penalty of perjury that the property, or obtaining money or property by fraud
in c	connection with a bankruptcy case can	result in fines up to \$250,000, or imprisonn	nent for up to 20 years, or both.
	U.S.C. §§ 152, 1341, 1519, and 3571.		
18 l	/		
18 l			
18 1	The thank	₩	
18 1	Intrae bare	<u> </u>	
18 1	MENAL JSAN Signature of Debtor 1	Signature of Debtor 2	
18 (	7	Signature of Debtor 2	
18 (	7 Date 07/15/2016	Signature of Debtor 2  Date	
18 (	7 Date 07/15/2016	Signature of Debtor 2	Filing for Bankruptcy (Official Form 107)?
18 L	7 _{Date} <u>07/15/2016</u> you attach additional pages to <i>Your Si</i>	Signature of Debtor 2  Date	Filing for Bankruptcy (Official Form 107)?
Did	7 Date 07/15/2016	Signature of Debtor 2  Date	Filing for Bankruptcy (Official Form 107)?
Did V	7 _{Date} 07/15/2016 you attach additional pages to <i>Your Si</i> No	Signature of Debtor 2  Date	Filing for Bankruptcy (Official Form 107)?
18 L Did 回	7 Date 07/15/2016 you attach additional pages to <i>Your Si</i> No Yes	Signature of Debtor 2  Date latement of Financial Affairs for Individuals	
Did Did	7 Date 07/15/2016 you attach additional pages to <i>Your Si</i> No Yes you pay or agree to pay someone who	Signature of Debtor 2  Date	
Did Did	7 Date 07/15/2016 you attach additional pages to Your Si No Yes you pay or agree to pay someone who	Signature of Debtor 2  Date latement of Financial Affairs for Individuals	

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Fill in this inf	ormation to ide	entify your case:		
	Trenae Shafor	n Drane		
	First Name	Middle Name	Last Name	
Debtor 2				į
(Spouse, if filing)	First Name	Middle Name	Last Name	~~~~
United States B	sankruptcy Court fo	or the: Northern District of I	llinois	
Case number (If known)				

## Official Form 108

## Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- m creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1:

**List Your Creditors Who Have Secured Claims** 

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the propert as exempt on Schedule C No Yes	
Creditor's name: Nissan Motors	Suπender the property.		
Description of 2014 Nissan Altima property securing debt:	Retain the property and redeem it.		
	Retain the property and enter into a Reaffirmation Agreement.		
	Retain the property and [explain]:		
Creditor's name:	☐ Surrender the property.	□ No	
	Retain the property and redeem it.	Yes	
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
	Retain the property and [explain]:		
Creditor's	☐ Surrender the property.	☐ No	
name:	Retain the property and redeem it.	Yes	
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	CO	
	Retain the property and [explain];		
Creditor's	☐ Surrender the property.	□ No	
	Retain the property and redeem it.	Yes	
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
	Retain the property and [explain]:		

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Trenae Shafon Drane

Middle Name

Document

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Debtor 1

Case number (If known)

## **List Your Unexpired Personal Property Leases**

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal proper	rty leases	Will the lease be assumed?
Lessor's name:		□ No
Description of leased property:		Yes
Lessor's name:		□ No
Description of leased property:		☐ Yes
Lessor's name:		□ No
Description of leased property:		☐ Yes
Lessor's name:		□ No
Description of leased property:		Yes
_essor's name:		□ No
Description of leased property:		Yes
.essor's name:		□ No
Description of leased property:		Yes
essor's name;		□ No
Description of leased roperty:		Yes
33: Sign Below		
der penalty of perjury, I declare that I harsonal property that is subject to an une	ave indicated my intention about any property of my expired lease.	estate that secures a debt and any
Total frame	×	
gnature of Debtor 1	Signature of Debtor 2	***************************************
ate 07/15/2016 MM / DD / YYYY	Date	